

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

FREEDOM PROJECT; THE

ADDRESS (number and street)

631-B Pennsylvania Ave., SE

☐Check if different
than previously
reported. (ACC)

Washington

DC

20003

0003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00305805

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

11

04

2008

in the
State of

DC

5. Covering Period

10

16

2008

through

11

24

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Margee Clancy

Signature of Treasurer

Electronically Filed by Margee Clancy

Date

06

01

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
FREEDOM PROJECT; THE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		363740.79
(b) Cash on Hand at Beginning of Reporting Period	294425.51	
(c) Total Receipts (from Line 19)	63096.96	1325240.41
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	357522.47	1688981.20
7. Total Disbursements (from Line 31)	174623.38	1506082.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	182899.09	182899.09
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FREEDOM PROJECT; THE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	20250.00	374665.94
(i) Itemized (use Schedule A)	405.00	7510.00
(ii) Unitemized	20655.00	382175.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	41800.00	927000.00
(c) Other Political Committees (such as PACs)	62455.00	1309175.94
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	641.96	1064.47
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	15000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	63096.96	1325240.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63096.96	1325240.41

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	109623.38	689046.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	109623.38	689046.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	1613.15
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	787822.65
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	6000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	7600.00
29. Other Disbursements.....	15000.00	20000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	174623.38	1506082.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	174623.38	1506082.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	62455.00	1309175.94
34. Total Contribution Refunds (from Line 28(d))	0.00	7600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62455.00	1301575.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	109623.38	689046.31
37. Offsets to Operating Expenditures (from Line 15, page 3)	641.96	1064.47
38. Net Operating Expenditures (subtract Line 37 from Line 36)	108981.42	687981.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
 James Boland

Mailing Address 4115 Leland Street

City State Zip Code
Chevy Chase MD 20815-5033

FEC ID number of contributing
federal political committee.

C

Name of Employer
 The Boland Company

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

11 / 12 / 2008

Transaction ID: SA11AI-5462-20182-c

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
 Roger Broderick

Mailing Address 8888 Keystone Crossing
 Suite 720

City State Zip Code
Indianapolis IN 46240-4639

FEC ID number of contributing
federal political committee.

C

Name of Employer
 White Oak Advisors

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 27 / 2008

Transaction ID: SA11AI-10895-20264-c

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)
 Kenneth Byers

Mailing Address 4650 Willow Hills Lane

City State Zip Code
Cincinnati OH 45243-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ken Byers & Associates

Occupation
 Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 31 / 2008

Transaction ID: SA11AI-4298-20257-c

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
David Kim

Mailing Address 22 Stoney Wylde Lane

City State Zip Code
Greenwich CT 06830-3408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Apax Partners

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI-10894-20259-c

Amount of Each Receipt this Period

1700.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Gary Sirak

Mailing Address 4700 Dressler Road NW

City State Zip Code
Canton OH 44718-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sirak Financial Services

Occupation
Insurance Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11AI-10896-20266-c

Amount of Each Receipt this Period

1200.00

Contribution

C.

Full Name (Last, First, Middle Initial)
John Snow

Mailing Address 122 Tempsford Lane

City State Zip Code
Richmond VA 23226-2319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cerberus Capital Mgt. LLC

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI-10891-20255-c

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

7900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 / 54

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE**A.**

Full Name (Last, First, Middle Initial)

John Strangfeld

Mailing Address 30 Chapin Road

City

Bernardsville

State

NJ

Zip Code

07924-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prudential Financial

Occupation

Senior Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI-10887-20244-c

Amount of Each Receipt this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael Szymanczyk

Mailing Address 215 Dryden Lane

City

Richmond

State

VA

Zip Code

23229-8204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Altria Group

Occupation

Chairman & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI-5221-20254-c

Amount of Each Receipt this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

David Whitehouse

Mailing Address 153 E 53rd Street

City

New York

State

NY

Zip Code

10022-4611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Apax Partners

Occupation

Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI-10893-20258-c

Amount of Each Receipt this Period

2300.00

Contributio

SUBTOTAL of Receipts This Page (optional)

9800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 54

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Raymond Wood

Mailing Address 34 Linden Lane

City

Chatham

State

NJ

Zip Code

07928-1622

FEC ID number of contributing
federal political committee.

C

Name of Employer
Credit Suisse

Occupation

Managing Director

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

Transaction ID: SA11AI-10868-20181-c

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

20250.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 54

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE**A.**Full Name (Last, First, Middle Initial)
CAREER COLLEGE ASSOCIATION POLITICAL ACTION COMMITTEEMailing Address 10 G Street NE
Suite 750City State Zip Code
Washington DC 20002-4258FEC ID number of contributing
federal political committee. **C** C00213066

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11C-3810-20261-c

Amount of Each Receipt this Period

1000.00

Contribution

B.Full Name (Last, First, Middle Initial)
Chrysler Service Contracts Inc. Political Support Committee

Mailing Address 1000 Chrysler Drive

City State Zip Code
Auburn Hills MI 48326-2766FEC ID number of contributing
federal political committee. **C** C00043687

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11C-5468-20262-c

Amount of Each Receipt this Period

5000.00

Contribution

C.Full Name (Last, First, Middle Initial)
Emergent Biosolutions Employees PAC

Mailing Address 2273 Research Boulevard

City State Zip Code
Rockville MD 20850-3264FEC ID number of contributing
federal political committee. **C** C00380303

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11C-4398-20245-c

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

8500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 54

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE**A.** Full Name (Last, First, Middle Initial)
FEDERATION OF AMERICAN HOSPITALS PAC (FEDPAC); (FKA AMERICAN HEALTH SYSTEMS PAC) Date of ReceiptMailing Address 801 Pennsylvania Avenue NW
Suite 245City State Zip Code
Washington DC 20004-2697FEC ID number of contributing
federal political committee. **C** C00002261

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11C-3824-20251-c

Amount of Each Receipt this Period

5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
GlaxoSmithKline Political Action Committee

Mailing Address Five Moore Drive

City State Zip Code
Research Triangle NC 27709FEC ID number of contributing
federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11C-5238-20263-c

Amount of Each Receipt this Period

2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Independent Community Bankers Of America Political Action CommitteeMailing Address 1615 L Street NW
Suite 900City State Zip Code
Washington DC 20036-5623FEC ID number of contributing
federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11C-10071-20260-c

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 54

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE**A.**Full Name (Last, First, Middle Initial)
INTUIT 21ST CENTURY LEADERSHIP FUND
Mailing Address 6220 Greenwich DriveCity State Zip Code
San Diego CA 92122FEC ID number of contributing
federal political committee. **C** C00361741

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11C-3624-20247-c

Amount of Each Receipt this Period

1500.00

Contribution

B.Full Name (Last, First, Middle Initial)
Las Vegas Sands Corp. Political Action Committee (SANDS PAC)
Mailing Address 3355 Las Vegas Boulevard SCity State Zip Code
Las Vegas NV 89109-8941FEC ID number of contributing
federal political committee. **C** C00399642

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼Aggregate Year-to-Date ▼
2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11C-10890-20250-c

Amount of Each Receipt this Period

2300.00

Contribution

C.Full Name (Last, First, Middle Initial)
LIBERTY MUTUAL INSURANCE COMPANY-PAC
Mailing Address 175 Berkeley SteetCity State Zip Code
Boston MA 2117FEC ID number of contributing
federal political committee. **C** C00171843

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11C-4239-20249-c

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

6300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 54

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
 FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
 MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code
 Springfield MA 01111-0001

FEC ID number of contributing
federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11C-4173-20248-c

Amount of Each Receipt this Period

2000.00

Contribution

B.

Full Name (Last, First, Middle Initial)
 NATIONAL ASSOCIATION OF BROADCASTERS TELEVISION AND RADIO POLITICAL ACTION COMMITTEE

Mailing Address 1771 N Street NW

City State Zip Code
 Washington DC 20036-2800

FEC ID number of contributing
federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 2 / 2 0 0 8

Transaction ID: SA11C-3811-20186-c

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
 NATIONAL CITY CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1900 E 9th Street

City State Zip Code
 Cleveland OH 44114-3404

FEC ID number of contributing
federal political committee. **C** C00141036

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 2 / 2 0 0 8

Transaction ID: SA11C-4364-20184-c

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 54

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
 FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 Massachusetts Avenue NE

City State Zip Code
 Washington DC 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11C-10190-20252-c

Amount of Each Receipt this Period

2500.00

Contribution

B. Full Name (Last, First, Middle Initial) Salem Communications Corporation Political Action Committee

Mailing Address 4880 Santa Rosa Road

City State Zip Code
 Camarillo CA 93012-5190

FEC ID number of contributing federal political committee. **C** C00321158

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11C-10889-20246-c

Amount of Each Receipt this Period

5000.00

Contribution

C. Full Name (Last, First, Middle Initial) Smurfit-Stone Container Corporation Political Action Committee

Mailing Address 150 N Michigan Avenue

City State Zip Code
 Chicago IL 60601-7553

FEC ID number of contributing federal political committee. **C** C00117424

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 2 / 2 0 0 8

Transaction ID: SA11C-10869-20185-c

Amount of Each Receipt this Period

2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 54

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Sprint Nextel Political Action Committee

Mailing Address PO Box 11315

City State Zip Code
 Kansas City MO 64112-0315

FEC ID number of contributing
federal political committee. **C** C00089342

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 1 2 / 2 0 0 8

Transaction ID: SA11C-5487-20183-c

Amount of Each Receipt this Period

2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

41800.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 54

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Crowne Plaza

Mailing Address 11 Kellogg Boulevard E

City

Saint Paul

State

MN

Zip Code

55101-1005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

641.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	8	

Transaction ID: SA15-10726-20253-e

Amount of Each Receipt this Period

641.96

Refund

SUBTOTAL of Receipts This Page (optional)

641.96

TOTAL This Period (last page this line number only)

641.96

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
123 Together.com

Mailing Address 111 S Bedford Street
Suite 200

City Burlington State MA Zip Code 01803-5145

Purpose of Disbursement
Internet

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-10075-10477-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

316.77

[MEMO ITEM]

Subitemization of Mastercard

B.

Full Name (Last, First, Middle Initial)
123 Together.com

Mailing Address 111 S Bedford Street
Suite 200

City Burlington State MA Zip Code 01803-5145

Purpose of Disbursement
Internet

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-10075-10500-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

269.81

[MEMO ITEM]

Subitemization of Mastercard

C.

Full Name (Last, First, Middle Initial)
Bin 36

Mailing Address 339 N Dearborn Street

City Chicago State IL Zip Code 60654-4817

Purpose of Disbursement
Gen. fund. food & bev.

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-10872-10461-V
Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

262.18

[MEMO ITEM]

Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Bobby Van's

Mailing Address 1201 NY Avenue

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Gen. fund. - food & bev.

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-9445-10463-V

Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

8164.00

[MEMO ITEM]

Subitemization of Mastercard

B.

Full Name (Last, First, Middle Initial)

Bogart Associates, Inc.

Mailing Address 1200 Trinity Drive

City
Alexandria

State
VA

Zip Code
22314-4724

Purpose of Disbursement
Travel reimbursement

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-9972-20220-e

Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

268.94

C.

Full Name (Last, First, Middle Initial)

Capitol Associates III-X

Mailing Address 426 C Street NE

City
Washington

State
DC

Zip Code
20002-5818

Purpose of Disbursement
Office rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-4390-20271-e

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

1437.50

SUBTOTAL of Disbursements This Page (optional) ►

1706.44

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Capitol Associates III-X	Transaction ID: SB21B-4390-20824-e Date of Disbursement																				
Mailing Address 426 C Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	8												
City Washington State DC Zip Code 20002-5818	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office rent Candidate Name	<table border="1"> <tr> <td colspan="10">1437.50</td> </tr> </table>	1437.50																			
1437.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Capitol Associates III-X	Transaction ID: SB21B-4390-20825-e Date of Disbursement																				
Mailing Address 426 C Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	8												
City Washington State DC Zip Code 20002-5818	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office rent Candidate Name	<table border="1"> <tr> <td colspan="10">1437.50</td> </tr> </table>	1437.50																			
1437.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Capitol Associates III-X	Transaction ID: SB21B-4390-20216-e Date of Disbursement																				
Mailing Address 426 C Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	0	8												
City Washington State DC Zip Code 20002-5818	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office rent Candidate Name	<table border="1"> <tr> <td colspan="10">1437.50</td> </tr> </table>	1437.50																			
1437.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4312.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Capitol Associates III-X	Transaction ID: SB21B-4390-20237-e Date of Disbursement																				
Mailing Address 426 C Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Washington State DC Zip Code 20002-5818 Purpose of Disbursement Postage Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>119.03</td> </tr> </table>	119.03																			
119.03																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/Type																				
B. Full Name (Last, First, Middle Initial) Capitol Associates III-X	Transaction ID: SB21B-4390-20239-e Date of Disbursement																				
Mailing Address 426 C Street NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	8												
City Washington State DC Zip Code 20002-5818 Purpose of Disbursement Office rent Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1437.50</td> </tr> </table>	1437.50																			
1437.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/Type																				
C. Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: SB21B-5501-10451-V Date of Disbursement																				
Mailing Address 300 1st Street SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	8												
City Washington State DC Zip Code 20003-1801 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>314.77</td> </tr> </table>	314.77																			
314.77																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/Type [MEMO ITEM] Subitemization of Mastercard																				

SUBTOTAL of Disbursements This Page (optional)

1556.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 1st Street SE

City
Washington

State
DC

Zip Code
20003-1801

Purpose of Disbursement
Mtg. exp. food & bev.

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-5501-20217-e
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

158.69

B.

Full Name (Last, First, Middle Initial)

Charley's Steak House

Mailing Address 2901 Parkway Boulevard

City
Kissimmee

State
FL

Zip Code
34747-4536

Purpose of Disbursement
Gen. fund. travel food.

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3196-10501-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

288.87

[MEMO ITEM]

Subitemization of Mastercard

C.

Full Name (Last, First, Middle Initial)

Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City
Middletown

State
OH

Zip Code
45042-3806

Purpose of Disbursement
Payroll processing

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-6282-20206-e
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

45.00

SUBTOTAL of Disbursements This Page (optional)

203.69

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City Middletown State OH Zip Code 45042-3806

Purpose of Disbursement
Payroll processing

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼Transaction ID: SB21B-6282-20241-e
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Amount of Each Disbursement this Period

45.00

B.

Full Name (Last, First, Middle Initial)
Commonwealth of Virginia

Mailing Address PO Box 27264

City Richmond State VA Zip Code 23261-7264

Purpose of Disbursement
Payroll taxes

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼Transaction ID: SB21B-8564-20207-e
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Amount of Each Disbursement this Period

146.58

C.

Full Name (Last, First, Middle Initial)
Congressional Liquors

Mailing Address 404 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement
Gen. fund. beverages

Candidate Name

003
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼Transaction ID: SB21B-6678-10462-V
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

Amount of Each Disbursement this Period

196.07

[MEMO ITEM]

Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional)

191.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Congressional Liquors

Mailing Address 404 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement
Gen. fund. - beverage

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-6678-10491-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

288.71

[MEMO ITEM]

Subitemization of Mastercard

B.

Full Name (Last, First, Middle Initial)
Delta Air Lines

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement
Gen. fund. - travel airfare

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5296-10488-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

749.51

[MEMO ITEM]

Subitemization of Mastercard

C.

Full Name (Last, First, Middle Initial)
Disney Resort Destinations

Mailing Address PO Box 403411

City Atlanta State GA Zip Code 30384-3411

Purpose of Disbursement
Gen. fund. - food & bev.

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-3618-10499-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

585.50

[MEMO ITEM]

Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Disney Resort Destinations	Transaction ID: SB21B-3618-10502-V Date of Disbursement																				
Mailing Address PO Box 403411	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	8												
City Atlanta State GA Zip Code 30384-3411	Amount of Each Disbursement this Period																				
Purpose of Disbursement Gen. fund. event deposit Candidate Name	<table border="1"> <tr> <td colspan="10">5600.00</td> </tr> </table>	5600.00																			
5600.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Mastercard																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Epiphany Productions	Transaction ID: SB21B-8930-20205-e Date of Disbursement																				
Mailing Address 104 Hume Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	8												
City Alexandria State VA Zip Code 22301-1015	Amount of Each Disbursement this Period																				
Purpose of Disbursement Gen. fundraising, consulting Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Mastercard																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) Extra Virgin	Transaction ID: SB21B-10222-10449-V Date of Disbursement																				
Mailing Address 4053 28th Street S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	8												
City Arlington State VA Zip Code 22206-2201	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	<table border="1"> <tr> <td colspan="10">229.02</td> </tr> </table>	229.02																			
229.02																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Mastercard																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Extra Virgin	Transaction ID: SB21B-10222-10472-V Date of Disbursement																				
Mailing Address 4053 28th Street S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	2	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	2	/	2	0	0	8												
City Arlington State VA Zip Code 22206-2201 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>7</td><td>1</td><td>.</td><td>0</td><td>8</td> </tr> </table>	2	7	1	.	0	8														
2	7	1	.	0	8																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B-5079-10450-V Date of Disbursement																				
Mailing Address PO Box 693	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	6	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	6	/	2	0	0	8												
City Memphis State TN Zip Code 38101-0693 Purpose of Disbursement Shipping Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>1</td><td>3</td><td>.</td><td>4</td><td>6</td> </tr> </table>	3	1	3	.	4	6														
3	1	3	.	4	6																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B-5079-10454-V Date of Disbursement																				
Mailing Address PO Box 693	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	6	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	6	/	2	0	0	8												
City Memphis State TN Zip Code 38101-0693 Purpose of Disbursement Shipping Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>4</td><td>.</td><td>6</td><td>3</td> </tr> </table>	2	4	.	6	3															
2	4	.	6	3																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 693	Transaction ID: SB21B-5079-10456-V Date of Disbursement <div> <div>10</div> <div>16</div> <div>2008</div> </div>
City Memphis State TN Zip Code 38101-0693 Purpose of Disbursement Shipping Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>149.32</div> [MEMO ITEM] Subitemization of Mastercard
B. Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 693	Transaction ID: SB21B-5079-10465-V Date of Disbursement <div> <div>11</div> <div>12</div> <div>2008</div> </div>
City Memphis State TN Zip Code 38101-0693 Purpose of Disbursement Shipping Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>92.79</div> [MEMO ITEM] Subitemization of Mastercard
C. Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 693	Transaction ID: SB21B-5079-10471-V Date of Disbursement <div> <div>11</div> <div>12</div> <div>2008</div> </div>
City Memphis State TN Zip Code 38101-0693 Purpose of Disbursement Shipping Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>52.54</div> [MEMO ITEM] Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10473-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

48.58

[MEMO ITEM]

Subitemization of Mastercard

B.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10476-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

18.57

[MEMO ITEM]

Subitemization of Mastercard

C.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10478-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

47.76

[MEMO ITEM]

Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10480-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

81.33

[MEMO ITEM]

Subitemization of Mastercard

B.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10481-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

151.22

[MEMO ITEM]

Subitemization of Mastercard

C.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10483-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

62.02

[MEMO ITEM]

Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10485-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

157.62

[MEMO ITEM]

Subitemization of Mastercard

B.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10489-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

88.22

[MEMO ITEM]

Subitemization of Mastercard

C.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 693

City Memphis State TN Zip Code 38101-0693

Purpose of Disbursement
Shipping

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5079-10492-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

123.25

[MEMO ITEM]

Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B-5079-10494-V Date of Disbursement																				
Mailing Address PO Box 693	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	8												
City Memphis State TN Zip Code 38101-0693	Amount of Each Disbursement this Period																				
Purpose of Disbursement Shipping Candidate Name	<table border="1"> <tr> <td colspan="10">86.42</td> </tr> </table>	86.42																			
86.42																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) First Financial Bank	Transaction ID: SB21B-3803-20209-e Date of Disbursement																				
Mailing Address 7795 Tylersville Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
City West Chester State OH Zip Code 45069-2592	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">4836.62</td> </tr> </table>	4836.62																			
4836.62																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Greener & Hook	Transaction ID: SB21B-10882-20203-e Date of Disbursement																				
Mailing Address 3101 Wilson Boulevard Suite 810	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	8												
City Arlington State VA Zip Code 22201-4445	Amount of Each Disbursement this Period																				
Purpose of Disbursement TFP media placement & production Candidate Name	<table border="1"> <tr> <td colspan="10">9000.00</td> </tr> </table>	9000.00																			
9000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

13836.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Jordan's 8	Transaction ID: SB21B-10718-10452-V Date of Disbursement
Mailing Address 523 8th Street SE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 6 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-2835	Amount of Each Disbursement this Period
Purpose of Disbursement Mtg. exp. food & bev.	<div>246.62</div>
Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Mastercard
B. Full Name (Last, First, Middle Initial) Jordan's 8	Transaction ID: SB21B-10718-10475-V Date of Disbursement
Mailing Address 523 8th Street SE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 2 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-2835	Amount of Each Disbursement this Period
Purpose of Disbursement Mtg. exp. food & bev.	<div>275.88</div>
Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Mastercard
C. Full Name (Last, First, Middle Initial) Mastercard	Transaction ID: SB21B-3605-20187-e Date of Disbursement
Mailing Address PO Box 42070	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 6 / 2 0 0 8</div> </div>
City Middletown State OH Zip Code 45042-0070	Amount of Each Disbursement this Period
Purpose of Disbursement Credit card (see memo entries)	<div>2349.30</div>
Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

SUBTOTAL of Disbursements This Page (optional)

2349.30

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT: THE

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Mortons of Arlington

Mailing Address 1631 Crystal Square Arcade

City Arlington State VA Zip Code 22202-3301

Purpose of Disbursement
Gen.fund. food & bev.

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-9892-10470-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

327.59

[MEMO ITEM]

Subitemization of Mastercard

B.

Full Name (Last, First, Middle Initial)
New Media Communications

Mailing Address 3046 Brecksville Road

City Richfield State OH Zip Code 44286-9399

Purpose of Disbursement
Contribution processing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-7123-20265-e
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

15.97

C.

Full Name (Last, First, Middle Initial)
New Media Communications

Mailing Address 3046 Brecksville Road

City Richfield State OH Zip Code 44286-9399

Purpose of Disbursement
Contribution processing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-7123-20267-e
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

74.40

SUBTOTAL of Disbursements This Page (optional)

90.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
New Media Communications

Mailing Address 3046 Brecksville Road

City Richfield State OH Zip Code 44286-9399

Purpose of Disbursement
Website maintenance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-7123-20225-e
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

4288.48

B.

Full Name (Last, First, Middle Initial)
Office of Tax and Revenue

Mailing Address PO Box 96385

City Washington State DC Zip Code 20090-6385

Purpose of Disbursement
Payroll taxes

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-4077-20208-e
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

427.00

C.

Full Name (Last, First, Middle Initial)
Pepco

Mailing Address PO Box 17143

City Baltimore State MD Zip Code 21297-1143

Purpose of Disbursement
Utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-9967-20221-e
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

69.07

SUBTOTAL of Disbursements This Page (optional)

4784.55

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.	Full Name (Last, First, Middle Initial) Pepco	Transaction ID: SB21B-9967-20234-e Date of Disbursement MM / DD / YYYY 11 / 24 / 2008
	Mailing Address PO Box 17143	
	City Baltimore State MD Zip Code 21297-1143	Amount of Each Disbursement this Period 129.77
	Purpose of Disbursement Utilities Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Piper Catering / Flik International	Transaction ID: SB21B-10885-20240-e Date of Disbursement MM / DD / YYYY 11 / 24 / 2008
	Mailing Address 2130 W Southport Road	
	City Indianapolis State IN Zip Code 46217-9481	Amount of Each Disbursement this Period 933.13
	Purpose of Disbursement Gen. fund., food & bev. Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Sonoma	Transaction ID: SB21B-10482-10479-V Date of Disbursement MM / DD / YYYY 11 / 12 / 2008
	Mailing Address 223 Pennsylvania Avenue SE	
	City Washington State DC Zip Code 20003-1107	Amount of Each Disbursement this Period 176.00
	Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)		1062.90
TOTAL This Period (last page this line number only)		

[MEMO ITEM]
Subitemization of Mastercard

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Szechuan House Fusion Grill

Mailing Address 515 8th Street SE

City Washington State DC Zip Code 20003-2835

Purpose of Disbursement
Mtg. exp. food & bev.

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-10221-10466-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

80.27

[MEMO ITEM]

Subitemization of Mastercard

B.

Full Name (Last, First, Middle Initial)
The Alamo Travel Group

Mailing Address 9000 Wurzbach Road

City San Antonio State TX Zip Code 78240-1038

Purpose of Disbursement
Gen. fund. travel reserv. fee

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-4316-10484-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

Subitemization of Mastercard

C.

Full Name (Last, First, Middle Initial)
The Alamo Travel Group

Mailing Address 9000 Wurzbach Road

City San Antonio State TX Zip Code 78240-1038

Purpose of Disbursement
Gen. fund. - travel reserv. fee

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-4316-10495-V
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Subitemization of Mastercard

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) The Winston Group</p> <p>Mailing Address 101 Constitution Avenue NW Suite 710</p> <p>City Washington State DC Zip Code 20001-2133</p> <p>Purpose of Disbursement Gen. fundraising - consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10316-20223-e</p> <p>Date of Disbursement 11 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>003 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Thirsty Bernie Bar & Grill</p> <p>Mailing Address 2163 N Glebe Road</p> <p>City Arlington State VA Zip Code 22207-2248</p> <p>Purpose of Disbursement Gen. fund. - food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10901-10497-V</p> <p>Date of Disbursement 11 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>003 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Mastercard</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Trattoria Alberto</p> <p>Mailing Address 506 8th Street SE</p> <p>City Washington State DC Zip Code 20003-2834</p> <p>Purpose of Disbursement Mtg. exp. food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10171-10453-V</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 196.95</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Mastercard</p>

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) Trattoria Alberto	Transaction ID: SB21B-10171-10490-V Date of Disbursement																				
Mailing Address 506 8th Street SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	8												
City Washington State DC Zip Code 20003-2834	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	<table border="1"> <tr> <td colspan="10">217.01</td> </tr> </table>	217.01																			
217.01																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Mastercard																				
B. Full Name (Last, First, Middle Initial) Trattoria Alberto	Transaction ID: SB21B-10171-10503-V Date of Disbursement																				
Mailing Address 506 8th Street SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	8												
City Washington State DC Zip Code 20003-2834	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mtg. exp. food & bev. Candidate Name	<table border="1"> <tr> <td colspan="10">324.00</td> </tr> </table>	324.00																			
324.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Mastercard																				
C. Full Name (Last, First, Middle Initial) US Airways	Transaction ID: SB21B-3616-10486-V Date of Disbursement																				
Mailing Address 2345 Crystal Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	8												
City Arlington State VA Zip Code 22227-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Gen. fund. travel airfare Candidate Name	<table border="1"> <tr> <td colspan="10">363.00</td> </tr> </table>	363.00																			
363.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of Mastercard																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A. Full Name (Last, First, Middle Initial) US Airways Mailing Address 2345 Crystal Drive	Transaction ID: SB21B-3616-10487-V Date of Disbursement <div> <div>11</div> <div>12</div> <div>2008</div> </div>
City Arlington State VA Zip Code 22227-0001 Purpose of Disbursement Gen. fund. travel airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1089.08</div> [MEMO ITEM] Subitemization of Mastercard
B. Full Name (Last, First, Middle Initial) US Airways Mailing Address 2345 Crystal Drive City Arlington State VA Zip Code 22227-0001 Purpose of Disbursement Gen. fund. - travel airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-3616-10496-V Date of Disbursement <div>11</div> <div>12</div> <div>2008</div> Amount of Each Disbursement this Period <div>318.00</div> [MEMO ITEM] Subitemization of Mastercard
C. Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 17577 City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-8324-20204-e Date of Disbursement <div>10</div> <div>29</div> <div>2008</div> Amount of Each Disbursement this Period <div>928.59</div>
SUBTOTAL of Disbursements This Page (optional) ▶	<div>928.59</div>
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address PO Box 17577

City Baltimore State MD Zip Code 21297-0513

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-8324-20269-e
Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

926.30

B.

Full Name (Last, First, Middle Initial)
Washington Courier

Mailing Address 5520 Cherokee Avenue
Suite 120

City Alexandria State VA Zip Code 22312-2319

Purpose of Disbursement
Courier

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-9969-20270-e
Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

99.44

C.

Full Name (Last, First, Middle Initial)
Washington Courier

Mailing Address 5520 Cherokee Avenue
Suite 120

City Alexandria State VA Zip Code 22312-2319

Purpose of Disbursement
Courier

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-9969-20222-e
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

51.76

SUBTOTAL of Disbursements This Page (optional)

1077.50

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Washington Courier

Mailing Address 5520 Cherokee Avenue
Suite 120

City Alexandria State VA Zip Code 22312-2319

Purpose of Disbursement
Courier

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-9969-20235-e
Date of DisbursementM M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

27.31

B.

Full Name (Last, First, Middle Initial)

Wiley Rein LLP

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006-2304

Purpose of Disbursement
Legal services

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3634-20195-e
Date of DisbursementM M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

6000.00

C.

Full Name (Last, First, Middle Initial)

Wiley Rein LLP

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006-2304

Purpose of Disbursement
Legal services

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3634-20236-e
Date of DisbursementM M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

9027.31

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Whitaker Askew

Mailing Address 3044 R Street NW

City
Washington

State
DC

Zip Code
20007-2962

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3802-20210-e
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

1409.62

B.

Full Name (Last, First, Middle Initial)

Whitaker Askew

Mailing Address 3044 R Street NW

City
Washington

State
DC

Zip Code
20007-2962

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3802-20229-e
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

1409.62

C.

Full Name (Last, First, Middle Initial)

Whitaker Askew

Mailing Address 3044 R Street NW

City
Washington

State
DC

Zip Code
20007-2962

Purpose of Disbursement
Travel reimbursement

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3802-20238-e
Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

360.00

SUBTOTAL of Disbursements This Page (optional)

3179.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Johnny DeStefano</p> <p>Mailing Address 1000 New Jersey Ave., SE #1011</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10021-20211-e Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="582.62"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Johnny DeStefano</p> <p>Mailing Address 1000 New Jersey Ave., SE #1011</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-10021-20230-e Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="582.62"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bruce Gates</p> <p>Mailing Address 4135 Seminary Road</p> <p>City Alexandria State VA Zip Code 22304-1647</p> <p>Purpose of Disbursement Adv. pmt., gen. fund, lodging. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-5055-20197-e Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1280.51"/></p>

SUBTOTAL of Disbursements This Page (optional)

2445.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Bruce Gates

Mailing Address 4135 Seminary Road

City Alexandria State VA Zip Code 22304-1647

Purpose of Disbursement
Adv. pmt., gen. fund. food & bev.

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5055-20198-e
Date of Disbursement

10 / 26 / 2008

Amount of Each Disbursement this Period

9024.06

B.

Full Name (Last, First, Middle Initial)
Bruce Gates

Mailing Address 4135 Seminary Road

City Alexandria State VA Zip Code 22304-1647

Purpose of Disbursement
Adv. pmt. gen fund. greens fees

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-5055-20199-e
Date of Disbursement

10 / 26 / 2008

Amount of Each Disbursement this Period

8269.99

C.

Full Name (Last, First, Middle Initial)
Mick Krieger

Mailing Address 6413 Hopi Drive

City West Chester State OH Zip Code 45069-1337

Purpose of Disbursement
Salary

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-2681-20227-e
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

2684.47

SUBTOTAL of Disbursements This Page (optional)

19978.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Mick Krieger

Mailing Address 6413 Hopi Drive

City
West Chester

State
OH

Zip Code
45069-1337

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-2681-20226-e
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

1416.24

B.

Full Name (Last, First, Middle Initial)

Kevin Mcgrann

Mailing Address 150 N Carolina Avenue SE

City
Washington

State
DC

Zip Code
20003-1841

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-4052-20212-e
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

682.50

C.

Full Name (Last, First, Middle Initial)

Kevin Mcgrann

Mailing Address 150 N Carolina Avenue SE

City
Washington

State
DC

Zip Code
20003-1841

Purpose of Disbursement
Salary

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-4052-20231-e
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

682.50

SUBTOTAL of Disbursements This Page (optional)

2781.24

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
FREEDOM PROJECT: THE

782.87

782.87

499.45

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Donald Seymour</p> <hr/> <p>Mailing Address 401 Holland Lane #609</p> <hr/> <p>City Alexandria State VA Zip Code 22314</p> <hr/> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-10022-20215-e</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 31 / 2008</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1231.62</div>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Donald Seymour</p> <hr/> <p>Mailing Address 401 Holland Lane #609</p> <hr/> <p>City Alexandria State VA Zip Code 22314</p> <hr/> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-10022-20233-e</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 14 / 2008</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1231.61</div>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jessica Towhey</p> <hr/> <p>Mailing Address 618 N Carolina Avenue SE Apt. 3</p> <hr/> <p>City Washington State DC Zip Code 20003-4392</p> <hr/> <p>Purpose of Disbursement Copywriting, consulting</p> <p>Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-4392-20214-e</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 31 / 2008</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">250.00</div>

SUBTOTAL of Disbursements This Page (optional) ►

2713.23

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Jessica Towhey

Mailing Address 618 N Carolina Avenue SE
Apt. 3

City Washington State DC Zip Code 20003-4392

Purpose of Disbursement
Copywriting - consulting

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-4392-20232-e

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ►

250.00

TOTAL This Period (last page this line number only) ►

109623.38

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Brian Bilbray for Congress

Mailing Address 970 Seacoast Drive

City
Imperial Beach

State
CA

Zip Code
91932-2402

Purpose of Disbursement
Contribution

Candidate Name
Brian P Bilbray

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 50

Transaction ID: SB23-8035-20190-e
Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Chambliss for Senate

Mailing Address PO Box 12469

City
Atlanta

State
GA

Zip Code
30355-2469

Purpose of Disbursement
Contribution, run-off 12/2/2008

Candidate Name
Saxby Chambliss

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

State: GA District: Runoff

Transaction ID: SB23-8611-20218-e
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Henry Brown for Congress

Mailing Address PO Box 61886

City
North Charleston

State
SC

Zip Code
29419-1886

Purpose of Disbursement
Contribution

Candidate Name
Henry Brown

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 01

Transaction ID: SB23-8343-20191-e
Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Jay Love For Congress Committee

Mailing Address 1020 Monticello Court
Suite 205

City State Zip Code
Montgomery AL 36117-1901

Purpose of Disbursement
Contribution, Debt retirement

Candidate Name
Jay K Love

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

State: AL District: 02

Retire Debt - P2008

Transaction ID: SB23-10472-20202-e
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
John Sullivan for Congress

Mailing Address 6130 S Maplewood Avenue
Suite B

City State Zip Code
Tulsa OK 74136-2128

Purpose of Disbursement
Contribution

Candidate Name
John Sullivan

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OK District: 01

Transaction ID: SB23-8615-20189-e
Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Ken Calvert For Congress

Mailing Address PO Box 20123

City State Zip Code
Riverside CA 92516-0123

Purpose of Disbursement
Contribution

Candidate Name
Mr. Ken Calvert

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 44

Transaction ID: SB23-10877-20193-e
Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 / 54

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Lungren for Congress

Mailing Address 9321 Silverbend Lane

City Elk Grove State CA Zip Code 95624-3985

Purpose of Disbursement
Contribution

Candidate Name
Daniel Lungren

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
State: CA District: 03
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23-9887-20188-e
Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Lynn Jenkins For Congress

Mailing Address PO Box 1441

City Topeka State KS Zip Code 66601-1441

Purpose of Disbursement
Contribution

Candidate Name
Lynn Jenkins

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
State: KS District: 02
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23-10723-20194-e
Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Trakas For Congress

Mailing Address 6924 Brettin Drive

City Independence State OH Zip Code 44131-6543

Purpose of Disbursement
Contribution

Candidate Name
James Peter Trakas

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
State: OH District: 10
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23-10881-20201-e
Date of Disbursement

10 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 / 54

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
William Russell For Congress

Mailing Address PO Box 630

City Johnstown State PA Zip Code 15907-0630

Purpose of Disbursement
ContributionCandidate Name
William RusselOffice Sought: ☒ House
☐ Senate
☐ President

State: PA District: 12

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼Transaction ID: SB23-10879-20200-e
Date of DisbursementM M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

50000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 / 54

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)
Coleman for Senate Recount Fund

Mailing Address c/o Coleman for Senate 8
680 Transfer Road, Suite A

City Saint Paul State MN Zip Code 55114-1487

Purpose of Disbursement
Contribution, recount

Candidate Name
Norm Coleman

012
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President
State: MN District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29-10884-20219-e
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Ken Calvert For Congress

Mailing Address PO Box 20123

City Riverside State CA Zip Code 92516-0123

Purpose of Disbursement
Contribution, recount

Candidate Name
Mr. Ken Calvert

012
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
State: CA District: 44
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29-10877-20272-e
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Mcclintock For Congress

Mailing Address 1700 Eureka Road
Suite 170

City Roseville State CA Zip Code 95661-7777

Purpose of Disbursement
Contribution, recount

Candidate Name
Thomas Mcclintock

012
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
State: CA District: 04
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29-10445-20273-e
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

15000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 54 / 54

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
FREEDOM PROJECT; THE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capitol Associates III-XNature of Debt (Purpose):
Administrative/Salary/Ove-
rhead-Office re

Mailing Address 426 C Street NE

City State ZIP Code
Washington DC 20002-5818

Outstanding Balance Beginning This Period

1437.50

Transaction ID: SD10-DEBT20824

Amount Incurred This Period

0.00

Payment This Period

1437.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capitol Associates III-XNature of Debt (Purpose):
Administrative/Salary/Ove-
rhead-Office re

Mailing Address 426 C Street NE

City State ZIP Code
Washington DC 20002-5818

Outstanding Balance Beginning This Period

1437.50

Transaction ID: SD10-DEBT20825

Amount Incurred This Period

0.00

Payment This Period

1437.50

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

0.00